

**Lincoln School Mentor Program
Student Proposal**

Please fill out this form and return it to the Mentor Program Box on the LSPA table by **Friday, December 4.**

Student Name

Address

E-mail

Telephone

Grade and Teacher

What topics are you interested in learning more about?

1st Choice: _____

2nd Choice: _____

How did you become interested in your choice of topics?

What do you hope to learn about your topics?

Do you know a mentor for your area of interest?

Parent Signature _____

The Parent Coordinator role is critical to the success of this program. Parent Coordinators liaise between student and mentor, schedule meetings and ensure the group is on track.

Are you willing to coordinate your child's group? Y N